PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2003								Application or Docket Number 10/733564 ANOSSI					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN		
TOTAL CLAIMS			35					RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUM	MBER EXTRA		BASIC F	EE 385.0	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			3∫ minus 20=		*	15		X\$ 9=		OR	Y240		
INDEPENDENT CLAIMS					* (2		X43=		OR	X86=		
ML	JLTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR			
* If the difference in column 1 is less than zero, enter "0" i						column-2		TOTAL	-	OR	L		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	L ENTITY	– OR	OTHER		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE	
	Total	. 9	Minus	- 3	5	=		X\$ 9 ₌		OR	X\$18=		
	Independent	1.3	Minus	***	5_	=	1	X43=		OR	X86=		
	FIRST PRESE	NTATION OF MI	JETIPLE DE	PENDENT	ELAIM		ı	+145=		OR	+290=		
		•					L	TOTA		1	TOTAL ADDIT. FEE		
		(Column 1)		(Colum		(Column 3)		DD(1. F C.	÷ !		ADDII. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	ı	X\$ 9≈	<i>'</i>	OR	X\$18=		
	Independent	* NTATION OF MU	Minus	***	CL AINA	=		X43=		OR	X86=		
1	rino: FREGE	WIATION OF MIC	LIFLE DE	ENDENT	·			+145=		OR	+290=		
						AI	TOTAL		OR	TOTAL ADDIT. FEE			
		(Column 1)		(Columi		(Column 3)			:				
MEN		CLAIMS REMAINING AFTER AMENDMENT		HIGHE: NUMBE PREVIOL PAID FO	ER JSLY	PRESENT EXTRA		RATE	ADDI- TIONAL: • FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	###		=		X43=		1 . t	X86=		
`	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT (CLAIM		H	-		OR			
* If the entry in column 1 is less than the entry in column 2, write '0' in column 3.													
andi an H	the "Highest Num the "Highest Num	nber Previously Painber Previously Painber Previously Paid	d For IN THIS d For IN THIS	S SPACE is I	ess than	20, enter "20." 3, enter "3."		TOTAL DIT. FEE in the ap	propriate bo		TOTAL DDIT. FEE mn 1.		

FORM PTO-875 (Rev. 10/03)

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